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CONFIRMATION NO. 6271

<b>SERIAL NUMBER</b> 10/700,802	<b>FILING OR 371(c) DATE</b> 11/03/2003 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2621	<b>ATTORNEY DOCKET NO.</b> 81099/7114	
<b>APPLICANTS</b> Thomas Poslinski, San Diego, CA; Kim Annon Ryal, Poway, CA;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/272,177 10/15/2002 PAT 6,775,461					
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/02/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>helson</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 37123					
<b>TITLE</b> Method and apparatus for partial file delete					
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		